

Child Welfare Improvement and Accountability Act System Improvement Plan

Inyo County

The requirements of AB 636 has provided Inyo County the opportunity to identify current strengths and operating parameters of its child welfare system, as well as to frame an improvement direction for the future.

As noted in the self-assessment, the initial process provided a beginning forum for the community to provide feedback about child welfare services. Continued input was sought as part of the system improvement planning process and will continue to be sought and incorporated into the coming year's specific improvement activities.

Inyo's selected areas for Outcome and Systemic improvement are:

1. *Outcome 2A*: Rate of Recurrence of abuse/neglect in homes where children were not removed
2. *Systemic Factor*: Foster/Adoption Parent Licensing, Recruitment and Retention
3. *Systemic Factor*: Management Information Systems

1. Local Planning Bodies

Participants in the self-assessment and system improvement planning included representatives from across systems that serve family's in or at-risk for entering the child welfare system.

Input and feedback was solicited and obtained from individuals who are represented on the following local planning bodies: Children's Services Council, Child Abuse and other Prevention Services Sub-Committee, First 5 Inyo County, Juvenile Justice Commission, Child and Family Staffing, Multiple Disciplinary Teams, Labor, County Board of Supervisors, Faith-Based Organizations, and Community Based Organizations such as Toiyabe Indian Health Project, Salvation Army, and Inyo Mono Advocates for Community Action.

Individual participants included:

Name	Affiliation
Jean Dickinson	ICHHS Director
James Moffett	Chief Probation Officer
Linda Benson	HHS Assistant Director
Tamara Cohn	County Health Department
Dr. Gail Zwier	County Mental Health; Alcohol and Drug
Tiernie Wilson	Parent Representative
Dr. Joen Painter	Local Education Agency
Carl A. Guilford, Jr.	Adoptions

Margaret Romero	Tribal Representative, Toiyabe Indian Health Project
Peggy Vega	ICWA Coordinator
Glenn Mc Clinton	Law Enforcement
Honorable Brian Lamb	Superior Court Judge
Nancy Moxley for Honorable Dean Stout	Superior Court Judge
Tom Simpson	Labor
Susan Brooks	Regional Training Academy
Jeff Griffiths	Foster Parent; First 5 Commissioner
Art Maillet	District Attorney
Debbie Breazeale	Past Foster Parent; Salvation Army
Robyn Wisdom	Community Based Organization; Child Abuse Prevention Council
Marilyn Mann	County Children's Social Services
Valerie Carlson-Behrandt	Child Welfare Social Worker
Lan Doubt	Child Welfare Social Worker
Kathy Rose	HHS Children's Social Services Licensing
Danielle Moffett	HHS Coordinator of Children's Volunteer Services
Ginny Bird	County Victim Witness
Pam Blackwell	HHS Children's Mental Health
Joanne Parsons	Inyo County Office of Education
Yvonne Deming	Child Welfare Social Worker
Karen Planchon	Child Welfare Social Worker
Jodi Golden	Child Welfare Social Worker

2. Share Findings that Support Qualitative Change

Information from a variety of sources was included in the self-assessment and assisted in determined strengths and areas for improvement. Documents references were Inyo County 2002/2003 Grand Jury Report, Inyo Mono Advocates for Community Action, Head Start Community Assessment, First 5 Inyo County Strategic Plan, Inyo County Maternal Child Health 5 year plan, Inyo County's Child Abuse Prevention, Intervention and Treatment Plan (CAPIT and CBFRS), Inyo County's Children's System of Care plan, Inyo County Mentoring plan and reports, Inyo County's Foster Care Training and Recruitment Plan, and Toiyabe Indian Health Project Resource Guide.

Direct input from stakeholders in conjunction with supervisor and manager experience was most useful in assessing the status of Inyo's Child Welfare system. Several group meetings were held and numerous individual contacts and/or interviews were made. Input was gathered, prepared in written format, distributed for feedback, then suggestions were incorporated until stakeholders were satisfied that an accurate portrayal of child welfare in Inyo County was achieved. As a low population county and given the data management weaknesses of the county, the least helpful information was the CWS/CMS Outcome Data Report. To compensate for lack of reliable data, individual case review was also used.

3. Self Assessment Summary

Child Welfare Improvement and Accountability Act Self-Assessment Summary *Inyo County*

Inyo County's Child Welfare self-assessment was conducted during the last quarter of the 2003/2004 fiscal year. Participation and input from various community and agency stakeholders as specified by AB 636, review of available data through State Child Welfare reporting systems, and other relevant documentation was used to analyze each State outcome in conjunction with County Child Welfare and Juvenile Probation systems that serve children and families.

The AB 636 Self-Assessment process is affording the community an opportunity to frame its services to children and families, beginning with child abuse prevention and ending with formal system intervention. This initial self-assessment has provided a beginning forum for the community to provide feedback about Child Welfare services. Continued input will be encouraged and solicited over the year and included in improvement planning activities. Formal reporting mechanisms to the community in regards to progress will be identified during the improvement planning process.

The self-assessment focuses on the County's strengths and areas needing improvement as they relate to Inyo's achievement of the State mandated outcomes**. The outcomes include:

- *Safety Outcomes*
 1. Children are first and foremost protected from abuse and neglect
 2. Children are maintained safely in their homes whenever possible and appropriate.
- *Permanency and Stability Outcomes*
 3. Children have permanency and stability in their living situations without increasing re-entry to foster care.
- *Family Relationships and Community Connections*
 4. The family relationships and connections of the children served by the CWS will be preserved, as appropriate.
- *Child and Family Well-Being Outcomes*
 5. Children receive adequate services to meet their educational needs.
 6. Children receive services adequate to their physical, emotional, and mental health needs.
 7. Families have enhanced capacity to provide for their children's needs.
 8. Youth emancipating from foster care are prepared to transition to adulthood.

** The State has not yet developed indicators to measure achievement for Outcome numbers 5,6,and 7 as so were not specifically analyzed for this self-assessment. Because

a number of Stakeholder comments received spoke to these Outcomes, the related feedback was included as part of either the Outcome 1-4, 8 analyses or the review of Systemic Factors.

Inyo's ability to achieve success with children and families is most significantly influenced by the rural geographical setting, low population density, and community context in which services are provided. Inyo's communities have high standards for the treatment of children, a low tolerance for negative behaviors, and an expectation that Child Welfare and Probation systems will address the related concerns.

Demographic data and case specific demographic data for Inyo County illustrates the low number of residents and child welfare/probation cases in the county. Inyo County must cautiously approach data analysis in that the numbers reported are often statistically insignificant and cannot alone be used to draw conclusions, identify trends or service gaps.

Inyo County is relatively inexperienced with the CWS/CMS system due to staff turnover resulting in continued inexperienced staff, limited training opportunities, and reduced numbers of staff. This has resulted in delayed data input that has led to unreliable reports as well as the inability to access relevant reports needed to analyze the outcome data. To the extent it was feasible, individual cases were reviewed and data hand counted. It is not a requirement for Probation to enter and track data through the CWS/CMS system. Analysis relied largely on Stakeholder input and feedback as well as supervisor and manager experience.

Safety Outcomes

Despite the higher than average recurrence of maltreatment referrals, community context insures a higher degree of accountability for its citizens and therefore a safer environment for all. Lack of community resources and drug/alcohol use may contribute to the rates of neglect. County strengths include high levels of face-to-face oversight of children in placement, individualized service provision, and commitment to and involvement in the lives of children and families either at-risk for or participating in the Child Welfare system. In addition, schools, law enforcement, and community helping agencies work effectively together in identifying and monitoring at-risk youth/families. The small size of Inyo's systems enhances these efforts.

Areas for improvement or focus might include:

- Consistent use of risk assessment tools by staff and on-going training is important to maintaining a quality program and assuring appropriate decisions are made.
- Further analysis and monitoring of the outcome indicators as data is brought up to date in the CWS/CMS system and relevant reports are identified and accessible.
- Further data collection and analysis of the occurrence and role of domestic violence in child abuse cases.
- Participation in activities that address substance abuse prevention and intervention

Permanency and Stability Outcomes

Inyo's Child Welfare system's ideal permanency and stability options include:

- preventing the need for removal of a child and,
- when a child is removed, to maintain him/her within the community and with family members whenever possible.

When children can remain in the community and in proximity of his/her parent, reunification services can be successful and permanent, stable living situations can be achieved for children. This shared philosophies among all parties involved in service provision as well as their commitment to working together in the best interest of the child highlights an Inyo strength.

Inyo's greatest barrier to permanency and stability success appears to be its lack of local placement options as well as the accompanying issues that perpetuate the service gap. A planned, systematic approach to addressing public perception issues as well as a collaborative effort to recruit, retain, and train new local placement options could increase the availability and variety of local placement options thereby alleviating many of the consequences arising from out of the area placements. Supporting strategies might include the implementation of "Specialized Foster Care Rates" and researching additional sources of funding.

Other areas for improvement or focus include:

- Maintaining early concurrent planning
- Advocating for increased child care options for foster parents
- Increasing foster parent capacity to handle negative behaviors.
- Maintaining Children's System of Care approach in the absence of funding.
- Developing a better understanding of how Children's System of Care contributes to the County's ability meet or fail to meet the expected Child Welfare Improvement and Accountability Outcome.

Family Relationships and Community Connections

Individualizing services to meet the needs of children and families which includes maintaining children within the community and in proximity of family supports is one of Inyo's greatest strengths. Collaborative relationships between CWS system staff and the local ICWA representative along with Native American community service providers are notable.

The most significant barrier to maintaining family relationships and community connections is the lack of appropriate local placement options. Other important services to develop and/or maintain to the extent financial resources allow are counseling for families, mental health

services for children, parent education/support opportunities that address dealing with challenging behaviors.

Child and Family Well-Being

Despite the constraints and challenges posed by geographic isolation, low population base, and limited local resources, Inyo County has many strengths that contribute to its ability to achieve positive outcomes for transitional youth. Because of the small population and high community expectation, levels of accountability are high among child welfare service provider resulting in a continuous quest for identifying and implementing better ways of delivering services.

Agency staff and community members are acutely aware of the needs of every youth in the system, and feel the impacts of a youth's success or failure to become independent adults. Youths receive individualized planning, case monitoring, and support to the extent that financial resources and staff time allow. Commitment to assisting these youth is evidenced by the positive, cross-system, collaborative relationships with the probation, court, and law enforcement staff as well as local community schools and community-based organizations serving high-risk populations.

Inyo's ability to achieve positive outcomes for transitional youth could be improved by addressing identified areas of weakness. Areas for improvement might include:

- increasing availability of in-county placement options
- increasing transitional housing options in or reasonably close to the county
- identify strategies for staff to increase the focus on building relationships with Probation placements
- identify, recruit, and offer services to all youth eligible for ILP services

Conclusion and Recommendations

Inyo County's Child Welfare systems have many strengths that include its unified philosophy, effective communication between involved parties, commitment to building and maintaining relationships/partnerships between community agencies, individualized approach to serving children and families, systems that support high levels of accountability, and relationships with local ICWA representatives.

Maintaining sufficient levels of trained staff will be important to further Inyo's ability to achieve outcomes for children and families. To enhance community involvement, maximize community strengths and resources, and broaden the scope of input, volunteers that include children and families who receive services should be recruited to participate in activities related to the implementation of the Child Welfare Improvement and Accountability Act. As System Improvement Plan strategies are identified, Inyo should utilize their strengths to maximize success.

Priority areas for improvement or focus:

1. The lack of local placement options for children is a common finding throughout this self-assessment. As a small, rural county with limited resources, Inyo experiences very real barriers to developing and maintaining a viable network of in-county placement options for children. However, Inyo's lack of a community-wide, systematic approach to recruiting, training, and maintaining in-county placement options places the County at an even greater disadvantage. By increasing the number of in-county placement options, children and families would significantly improve their odds for success.
2. Continued focus on up dating and maintaining an up to date CWS/CMS database as well as increasing knowledge about and accessing available reports will provide the information necessary to monitor services and achievement of Outcomes. As data reporting becomes more reliable, utilize available State and National data to make relevant comparisons as a component in continued self-assessment.
3. Develop and implement an approach to educating the community about the role and responsibilities of the Child Welfare and Probation system.

Priority areas for further exploration through the Peer Quality Case Review

1. Use of risk assessment tools by staff.
2. Investigate the occurrence of and CWS practices around domestic violence in child abuse cases.
3. Early concurrent planning practices.
4. Investigate how Children's System of Care contributes to the County's ability meet or fail to meet the expected Child Welfare Improvement and Accountability Outcomes.

Outcome/Systemic Factor: 2A Rate of Recurrence of abuse/neglect in homes where children were not removed	
County's Current Performance: 14.3% Despite the higher than average recurrence of maltreatment referrals, community context insures a higher degree of accountability for its citizens and therefore a safer environment for all. Lack of community resources and drug/alcohol use may contribute to the rates of neglect. County strengths include high levels of face-to-face oversight of children in placement, individualized service provision, and commitment to and involvement in the lives of children and families either at-risk for or participating in the Child Welfare system. In addition, schools, law enforcement, and community helping agencies work effectively together in identifying and monitoring at-risk youth/families. The small size of Inyo's systems enhances these efforts.	
Improvement Goal 1.0 Reduce rates of recurrence of abuse/neglect in homes where children were not removed.	
Strategy 1. 1 Adopt and implement evidenced-based structured decision-making (SDM) approach to risk assessment and case planning.	Strategy Rationale¹ By implementation an evidenced-based program, Inyo can expect specified levels of quality assurance in their assessments of risk for children who have been referred to child welfare or are currently receiving services from child welfare. Structured Decision Making provides proven methods and tools for evaluating safety risk as well as guidance for planning services that are appropriate for the identified level of risk. This strategy is particularly appropriate for our small county for several reasons: <ul style="list-style-type: none"> - It provides initial and on-going structured training for staff. - It reduces subjectivity in decision-making, yet is flexible to accommodate extenuating individual circumstances (an issue for a small county where significant prior knowledge about families often exists.) - It provides an additional means of demonstrating and evaluating progress toward achieving expected outcomes- rather than relying solely upon CMS/CWS data which for Inyo is too small to draw reliable conclusions.

¹ Describe how the strategies will build on progress and improve this outcome or systemic factor

Milestone	1.1.1 Additional evaluation measurements identified.	Timeframe	June 30, 2005	Assigned to	Margaret Peterson, HHS Director of Program and Fiscal Evaluation
	1.1.2 Funds to support SDM tool identified.		January 31, 2005		Marilyn Mann, HHS Children's Social Services Manager
	1.1.3 SDM tool purchased		March 1, 2005		Marilyn Mann, HHS Children's Social Services Manager
	1.1.4 Internal support/follow up training plan for staff developed.		June 30, 2005		Marilyn Mann, HHS Children's Social Services Manager
	1.1.5 Implementation policies and procedures developed.		June 30, 2005		Marilyn Mann, HHS Children's Social Services Manager
	1.1.6 Staff are trained in the adopted SDM process		June 30, 2005		Marilyn Mann, HHS Children's Social Services Manager
	1.1.7 Structured Decision Making implementation begun		July 1, 2005		Marilyn Mann, HHS Children's Social Services Manager
Strategy 1. 2 Provide increased opportunities for both parents and children for whom substance abuse is present in the family and, who are in the child welfare system or who are at risk for entering the child welfare system, to participate in substance abuse prevention and/or intervention activities designed to increase the level of safety for children.			Strategy Rationale ¹ This strategy was developed in recognition of the higher presence of substance abuse issues in family's who have recurring rates of abuse/neglect when child is not removed from the home. Stakeholders acknowledged that one of the challenges for working with a family for whom substance abuse is an issue, is the difficulty in predicting levels of safety in a home at any given time- i.e. a family might be in recovery and be stable for several months, then have a single incident of relapse where a child's safety is in question. With the Safety Outcome and Goal in mind, Stakeholders decided to focus their strategy on the safety issues that arise for families when substance abuse is present. Stakeholders believed that children and families could be taught ways to maintain a safe environment despite associated substance use/abuse issues. Many ideas for how to maintain safety in the home where substance abuse is present were discussed. Suggestions		

			<p>included:</p> <ul style="list-style-type: none"> - <i>For the children:</i> provide structured opportunities other than counseling to learn about abuse prevention, keeping themselves safe in potentially volatile situations (how stay safe and not escalate a situation), issues around youth use/abuse, impacts to the child when the parent is learning to parent while in recovery, and how the child may have been impacted by a parent's use/abuse. - <i>For the parents:</i> provide on-going parent education in the community by working with community partners to make more classes CPS approved, develop alternative formats for delivery parent education, such as coordinating with home visiting programs and self-study programs, teach parents about parenting while in recovery/when sober, teach parents about how their kids have been impacted by use, teach strategies for recognizing triggers and redirecting behavior that might put a child in a dangerous situation. <p>In the SIP planning process, stakeholders who were present recognized that to effectively implement the strategy, additional planning would need to occur and include participation from other stakeholders and community partners.</p>		
Milestone	1.2.1. Current available services and gaps in services identified.	Timeframe	January 31, 2005	Assigned to	Linda Benson, HHS Assistant Director
	1.2.2 Planning leader identified.		November 1, 2004		Jean Dickinson, HHS Director
	1.2.3 A coordinated community plan that addresses gaps in service is developed by stakeholders that identifies activities to be implemented, timelines for implementation, and ways to maximize existing resources and funding streams.		June 30, 2005		Linda Benson, HHS Assistant Director

Notes:

All Child Welfare System Improvement Plan activities require additional staff and financial resources to implement.

Describe systemic changes needed to further support the improvement goal.

Improve Data Management Abilities (See related SIP template)

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

Structured Decision Making

Training for community partners who agree to implement parent education option.

Identify roles of the other partners in achieving the improvement goals.

Health and Human Services will lead the planning efforts for Strategy 1.2. Roles of other partners will be developed and defined as part of the collaborative planning process.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

- Amend the law to allow child welfare staff conducting investigations of reports of suspected child abuse and neglect the same level of access to children attending licensed child care programs, including Head Start, child care centers and family child care homes as allowed in the public school system through Penal Code 11174.3. This change would allow child welfare staff to assess the safety of very young children, who are at greater risk of serious harm, while they are in a safe environment.
- Amend the law under WIC Section 16507.7 to allow for a broader definition of what constitutes a CPS-approved parenting education class. A broader definition that recognizes programs that provide hands on parent training or modeling of parenting techniques, as well as those programs that focus on specific parenting issues such as parenting in blended families, parenting adolescents, or parenting in recovery would allow for case planning to be more individualized to the specific needs of children and their families.
- Implement the recommended caseload standards for child welfare workers to ensure a greater level of success in meeting the safety and permanency outcomes for children and their families. Recommended caseloads should reflect the uniqueness of child welfare functions in the rural areas where social workers are responsible for all levels of intervention and sometimes includes significant travel time due to large geographic areas and the remoteness of communities.
- Incorporate the Structured Decision Making model or a similar decision making tool into the existing child welfare case management information system. This would allow for more consistent, objective decision making throughout the various

stages of child welfare involvement, while reducing duplicative data entry functions.

- Amend confidentiality laws to allow for better communication between stakeholders for those children and families who have been identified as being better served outside the child welfare system through differential response.

¹ Describe how the strategies will build on progress and improve this outcome or systemic factor

Outcome/Systemic Factor: Foster/Adoption parent licensing, recruitment and retention	
County's Current Performance: Inyo's Child Welfare system's ideal permanency and stability options include: <ul style="list-style-type: none"> • preventing the need for removal of a child and, • when a child is removed, to maintain him/her within the community and with family members whenever possible. <p>When children can remain in the community and in proximity of his/her parent, reunification services can be successful and permanent, stable living situations can be achieved for children. This shared philosophies among all parties involved in service provision as well as their commitment to working together in the best interest of the child highlights an Inyo strength.</p> <p>Inyo's greatest barrier to permanency and stability success appears to be its lack of local placement options as well as the accompanying issues that perpetuate the service gap. A planned, systematic approach to addressing public perception issues as well as a collaborative effort to recruit, retain, and train new local placement options could increase the availability and variety of local placement options thereby alleviating many of the consequences arising from out of the area placements.</p>	
Improvement Goal 1.0 Increase community capacity to provide permanency and stability options for children	
Strategy 1. 1 Develop a systematic approach to recruiting, training, and maintaining in-county placement options	Strategy Rationale¹ In 3 of the 4 outcome areas, the lack of in-county placement options was noted as an area needing improvement. Implementation of this strategy has the potential to positively impact multiple outcome areas. This first year, the focus will be on developing the basic systems and infrastructure needed to sustain local placement options. Once this occurs, strategies to enhance local placement options can be explored (eg. Host families, respite care, Specialized Care Rate program, etc.).

¹ Describe how the strategies will build on progress and improve this outcome or systemic factor

Milestone	1.1.1 Baseline community capacity is defined	Timeframe	January 30, 2005	Assigned to	Margaret Peterson, HHS Director of Program and Fiscal Evaluation
	1.1.2 Local Community Based Organization identified to provide recruitment of, and training and support for, in-county foster care placement options.		November 1, 2004		Jean Dickinson, HHS Director
	1.1.3 Training and support plan for foster parents developed.		January 30, 2005		Linda Benson, HHS Assistant Director
	1.1.4 Recruitment plan developed		April 30, 2005		Linda Benson, HHS Assistant Director
	1.1.5 Infrastructure for accommodating increased levels of training developed		September 30, 2005		Linda Benson, HHS Assistant Director
Strategy 1. 2 Given available resources and by building upon current cross-system, multi-agency planning and coordination efforts, maintain an approach to working with the highest need families that is strength-based, family-centered and includes a continuum and coordination of services.			Strategy Rationale ¹ Implementation of this strategy helps Inyo achieve its ultimate goal for permanency and stability by providing a level of support services for families that reduce both the need for children to be in placement and the time spent in placement. Prior to 04/05, funding for Inyo’s Children’s System of Care (CSOC) was one component of an overall effort to implement an approach to working with highest need families in ways that built upon family strengths, the family’s natural resources, and addressed issues with the family’s own environment as well as included a continuum and coordination of service systems. The approach assumed that parents and family members would be involved. The expected result was that more children would remain in their home rather than in out of home placement. CSOC funding is no longer available from the State. Despite this lack of funding, stakeholders expressed commitment to maintaining an approach as described by the proposed strategy.		

Milestone	1.2.1. Key stakeholder leadership/policy team identified.	Timeframe	November 30, 2004	Assigned to	Jean Dickinson, HHS Director
	1.2.2 A plan for evaluating effectiveness of approach developed.		June 30, 2005		Margaret Peterson, HHS Director of Program and Fiscal Evaluation
	1.2.3 Core structural elements of approach identified and defined.		June 30, 2005		Linda Benson, HHS Assistant Director
Strategy 1. 3 Develop and implement an approach to educating the community about Child Welfare roles and responsibilities, program needs, and how people can contribute.			Strategy Rationale ¹ Stakeholders assumed that by engaging in community education efforts, greater community support for children in the Child Welfare system could be achieved and could be measured by the degree to which foster parents and mentors increase. In developing the milestones for this strategy, stakeholders agreed that to achieve the goal, the education approach needed to be targeted to specific populations for specific purposes- as opposed to a general community education campaign.		
Milestone	1.3.1 An education plan targeting specified community partners and stakeholders who regularly interact with families who are in the CSW is developed and implementation begun.	Timeframe	February 1, 2005	Assigned to	Marilyn Mann, HHS Children’s Services Programs Manager
	1.3.2 A marketing/recruitment/education plan targeting potential foster parents and mentors is developed.		February 1, 2005		Linda Benson, HHS Assistant Director
	1.3.3 Community “progress report” that relates to reporting progress towards increasing foster care options and available mentors is developed an implemented.		June 30, 2005		Linda Benson, HHS Assistant Director
Notes: All Child Welfare System Improvement Plan activities require additional staff and financial resources to implement.					

Describe systemic changes needed to further support the improvement goal.

N/A

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

Developing and evaluating the effectiveness of marketing strategies.

Additional training on developing effective evaluation plans.

Identify roles of the other partners in achieving the improvement goals.

Partners will need to commit to participate in SIP identified collaborative planning activities and contribute to implementation efforts.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

- Amend confidentiality laws to allow for better communication between stakeholders for those children and families who have been identified as being better served outside the child welfare system through differential response.
- Change the regulations in regards to the approval of relative and non-related extended family homes to allow for either the waiver or reimbursement of fees for background checks. This would remove a cost barrier for those low income families who are willing to provide a home to a foster child.
- Modify the current regulations governing the approval of relative and non-related extended family homes to allow children to be placed in their homes on an emergency basis if the family members obtain an initial clearance through the child abuse index and the California Law Enforcement Telecommunications System (CLETS), as well as an assessment of the home is completed. In rural communities, these potential caregivers are often known by child welfare staff and oversight is more easily provided to ensure the safety of children while the full approval process is completed. This would promote permanency and stability for children removed from their home by allowing for more immediate placement in the home of someone the child knows and is comfortable with, which helps to reduce the number of placement changes experienced by children.
- Amend licensing regulations to allow for the emergency certification of foster homes so that children can be more readily placed in a home when out of home placement is needed. Again, in rural communities these caregivers are often known by child welfare staff and oversight is more readily available to ensure the safety of children.
- Amend the law to allow for guardianships to be considered as equal to adoption as a permanency plan for foster children when maintaining the child's connection to their family of origin has been determined as being in the best interest of the child. In addition, this change would recognize and honor those cultures that do not believe in severing parental ties to their children, such as the Native American community.

- Amend the current state law in regards to the established timelines for status reviews during family reunification to coincide with federal timelines. This would reduce the margin for error in making the required findings and orders within the required timeframes.
- Change the current regulations regarding the eligibility for foster funding from determining eligibility based solely upon the financial status of the home of removal at the time the child is removed from the home. Currently, relative caregivers who are low income are not always eligible for foster funding and are only eligible for a reduced financial reimbursement through the non-needy caregiver funding. This limits the amount of resources available to the foster child and is sometimes a barrier to a child's placement in the home of a relative.
- Implement the recommended caseload standards for child welfare workers to ensure a greater level of success in meeting the safety and permanency outcomes for children and their families. Recommended caseloads should reflect the uniqueness of child welfare functions in the rural areas where social workers are responsible for all levels of intervention and sometimes includes significant travel time due to large geographic areas and the remoteness of communities.
- Amend current regulations governing the required social worker and probation contacts with children and families to allow for shared responsibility for contacts with those families who have been identified as dual jurisdiction or who are known to both agencies as is frequently the case in rural communities where there are limited local out of home placement options.

¹ Describe how the strategies will build on progress and improve this outcome or systemic factor

Outcome/Systemic Factor: Management Information Systems					
County's Current Performance: Inyo County is relatively inexperienced with the CWS/CMS system due to staff turnover resulting in continued inexperienced staff, limited training opportunities, and reduced numbers of staff. This has resulted in delayed data input that has led to unreliable reports as well as the inability to access relevant reports needed to analyze the outcome data. To the extent it was feasible, individual cases were reviewed and data hand counted. It is not a requirement for Probation to enter and track data through the CWS/CMS system. Analysis relied largely on Stakeholder input and feedback as well as supervisor and manager experience.					
Improvement Goal 1.0 Meet the State threshold for Social Worker Visits Outcome Indicators 2B and 2C.					
Strategy 1. 1 Implement activities that will insure the CWS/CMS database can be used to report accurate outcome information			Strategy Rationale¹ Specific action is needed to insure the outcome data reported is accurate and reliable.		
Milestone	1.1.1 Protected staff time for data entry is maintained.	Timeframe	On-going	Assigned to	Marilyn Mann, HHS Children's Social Services Manager
	1.1.2 Back log data entered		September 30, 2005		Marilyn Mann, HHS Children's Social Services Manager
	1.1.3 All closed cases are closed on the CWS/CMS system.		September 30, 2005		Marilyn Mann, HHS Children's Social Services Manager
	1.1.4 All new staff trained within 60 days of employment.		On-going		Marilyn Mann, HHS Children's Social Services Manager

¹ Describe how the strategies will build on progress and improve this outcome or systemic factor

Strategy 1. 2 Develop a method to collect data about domestic violence and/or substance abuse issues for clients.		Strategy Rationale ¹ The self-assessment found that limited information is available regarding rates and impacts of domestic violence and substance abuse for families in the child welfare system. Stakeholders agreed that if the information was available, better services could be provided to families and a more accurate assessment of community safety levels could be determined.			
Milestone	1.2.1. Domestic violence/substance abuse data report template developed.	Timeframe	September 30, 2005	Assigned to	Kathy Rose, HHS Systems Support Analyst
	1.2.2 Data collection elements identified		December 1, 2004		Marilyn Mann, HHS Children’s Social Services Manager
	1.2.3 Feasibility of CWS/CMS to receive and report needed data determined		September 30, 2005		Kathy Rose, HHS Systems Support Analyst
	1.2.4 Current data collection system fine tuned to accommodate additional data elements and reporting template requirements.		September 30, 2005		Kathy Rose, HHS Systems Support Analyst

Note: All Child Welfare System Improvement Plan activities require additional staff and financial resources to implement.

Describe systemic changes needed to further support the improvement goal. N/A
Describe educational/training needs (including technical assistance) to achieve the improvement goals. CWS/CMS technical assistance will be required to reach stated milestones AND to improve our ability to analyze data for self assessment purposes (i.e. more information is needed to understand how data input relates to reported data).
Identify roles of the other partners in achieving the improvement goals. Law enforcement and victim witness reports of domestic violence where children reside in home are reported to CPS as a child abuse report.
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. <ul style="list-style-type: none"> Incorporate the Structured Decision Making model or a similar decision making tool into the existing child welfare case management information system. This would allow for more consistent, objective decision making throughout the various stages of child welfare involvement, while reducing duplicative data entry functions.

¹ Describe how the strategies will build on progress and improve this outcome or systemic factor